

**Community
Development
Financial
Institutions
Program**

Financial Assistance Component

FY 2003 Application

CDFI-0001

Paperwork Reduction Act Notice.

This submission requirements package is provided to *Applicants* for awards under the Community Development Financial Institutions Program.

Applicants are not required to respond to this collection of information unless it displays a currently valid OMB number. The estimated burden associated with this collection of information is 100 hours. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Department of the Treasury, Community Development Financial Institutions Fund, 601 13th Street, N.W., Suite 200 South, Washington, DC 20005.

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Part I. Applicant Information

Request total:

total amount of *Financial Assistance* and *Technical Assistance* requested by this application:

\$ _____

Applicant Contact Information

Organization Name: _____

Employer Identification Number (EIN): _____

Dunn & Bradstreet Number (if available): _____

Community Partner Name (if applicable): _____

Congressional District of *Applicant's* headquarters: _____

Corporate Existence:

Is the *Applicant* duly organized and validly existing under the laws of the jurisdiction in which it was formed or otherwise established?

____ Yes ____ No (if no, the entity is ineligible for funding.)

Website address: _____

Mailing Address: provide mailing address (and street address for overnight deliveries, if different).

Provide nine-digit zip code where available:

Authorized Representative's name and title, and address if different from *Applicant*:

Telephone number: _____

Fax number: _____

E-mail address: _____

Contact Person's name and title, and address if different from *Applicant*:

Telephone number: _____

Fax number: _____

E-mail address: _____

Estimate how long this application took to complete: _____ Hours

To the best of my knowledge and belief, all information in this application is true and correct. The application has been duly authorized by the governing body of the *Applicant*, and the *Applicant* certifies, attests to, and will comply with all Assurances and Certifications included with this application if any assistance is awarded.

Authorized Representative Signature: _____

Date: _____

Community Partner Signature (if applicable):

Date: _____

Part II. Total Request for Financial Assistance & Technical Assistance

Complete this form after completing the Financial Data Input, Matching Funds, Capital Need and Activity Levels Charts.

	Term (in months)	Rate	Amt. Requested
1. FINANCIAL ASSISTANCE			
Grant			
Loan (including Equity Equivalents)			
Equity Investment (for-profits only)			
Deposit or Credit Union Shares			
Secondary Capital (credit unions only)			
Total Financial Assistance			
2. TECHNICAL ASSISTANCE			
Consulting			
Technology			
Training			
Other			
Total Technical Assistance			
TOTAL REQUEST			

Total assets as of 12/31/02 _____

If the *FA* request is \$1 million or less and the *Applicant* meets the asset size standards set forth in the applicable *NOFA*, the *Applicant* is *Category I*.

If the *FA* request is over \$1 million and the *Applicant* meets the asset size standards set forth in the applicable *NOFA*, the *Applicant* is *Category II*.

Part III. Proposed Uses of Financial Assistance

For each proposed use, indicate what percentage of your *FA* request you plan to allocate to that use, both in total and for the three primary activity types, as applicable: *Economic Development*, *Affordable Housing*, and *Financial Services*. Also indicate what percentage will be targeted to use in *Hot Zones*.

Use Description

	Total Percentage	Percentage in <i>Hot Zones</i>
Capital for Loans and <i>Investments</i>		
Economic Development		
Affordable Housing		
Loan Loss Reserve		
Economic Development		
Affordable Housing		
Reserve Capital		
Financial Services		
Development Services		
Economic Development		
Affordable Housing		
Financial Services		
Other (describe):		

Part IV. Applicant's Organization Characteristics

Type of Entity (check one):

☐ For-Profit

☐ Non-Profit

Non-Profit Tax Exempt Status (if applicable):

☐ 501(c)(3)

☐ 501(c)(4)

☐ Federal Credit Union

☐ Other (specify):

NOTE: Applicants with a 501(c)(4) designation must complete the "501(c)(4) Questionnaire" in Part X.. Any Organization with a 501(c)(4) designation that engages in lobbying activities on or after January 1, 1996, is not eligible to receive an award from the Fund.

Type of Financial Institution (check one):

☐ Insured Depository Institution; Depository Institution Holding Company

☐ Insured Credit Union

☐ Loan Fund

☐ Venture Capital Fund

☐ Loan Purchaser

☐ Loan Guarantor

Applicant's Date of Incorporation (month/day/year) _____

Most recent fiscal year end:

(month/ year of latest available audited financial statements) _____

Number of Affiliates: _____

(add lines as needed)

Affiliate Name	EIN

Is your organization a faith-based organization? (A faith-based organization is one whose founding (through capitalization or otherwise), governance, or membership is derived from a religious institution.)

☐ Yes ☐ No

Did you finance any religious institutions or faith-based organizations in the previous fiscal year?

☐ Yes ☐ No

Part V. Markets Served – Complete for the Applicant, based on FY 2002 activity

Geographic Markets: (check all that apply)

- ☐ Major urban (population more than 1 million)
- ☐ Minor urban (population 1 million or less)
- ☐ Rural

Primary Geographic Market: (check one)

- ☐ Major urban (population more than 1 million)
- ☐ Minor urban (population 1 million or less)
- ☐ Rural

Customers Served: (check all that apply)

- ☐ Low- Income
- ☐ Very-Low Income
- ☐ Minority-Owned Business
- ☐ Women-Owned Business
- ☐ Start-Up Business
- ☐ Low-Income Owned Business

Targeted Areas: (check all that apply) See www.CDFIfundhelp.gov for maps.

- ☐ Appalachia
- ☐ Colonias
- ☐ *Hot Zone(s)* (if checked, you must include *Hot Zone* maps from MyCDFI at www.CDFIhelp.gov)
- ☐ Mississippi Delta

Part VI. Demographic Information

Ethnicity Summary (must equal 100%)

____% *Hispanic or Latino* ____% *Not Hispanic or Latino* ____% *Uncategorized*

Race Summary (must equal 100%)

____% *American Indian or Alaska Native* ____% *Asian*
____% *Black or African American* ____% *Native Hawaiian or Other Pacific Islander*
____% *White* ____% *Uncategorized*

Gender Summary (must equal 100%)

____% *Male* ____% *Female*

States/Jurisdictions Served

(check all states/jurisdictions where you plan to use the requested *FA*).

____ Alabama	____ Kentucky	____ Ohio
____ Alaska	____ Louisiana	____ Oklahoma
____ American Samoa	____ Maine	____ Oregon
____ Arizona	____ Marshall Islands	____ Palau
____ Arkansas	____ Maryland	____ Pennsylvania
____ California	____ Massachusetts	____ Puerto Rico
____ Colorado	____ Michigan	____ Rhode Island
____ Connecticut	____ Minnesota	____ South Carolina
____ Delaware	____ Mississippi	____ South Dakota
____ District of Columbia	____ Missouri	____ Tennessee
____ Fed. St. of Micronesia	____ Montana	____ Texas
____ Florida	____ Nebraska	____ Utah
____ Georgia	____ Nevada	____ Vermont
____ Guam	____ New Hampshire	____ Virgin Islands
____ Hawaii	____ New Jersey	____ Virginia
____ Idaho	____ New Mexico	____ Washington
____ Illinois	____ New York	____ West Virginia
____ Indiana	____ North Carolina	____ Wisconsin
____ Iowa	____ North Dakota	____ Wyoming
____ Kansas	____ Northern Mariana Isl.	

Part VII. CDFI Certification Status

To apply to the *Financial Assistance* Component, the *Applicant* must (i) be a certified *CDFI* with a certification expiration date after June 30, 2003, or (ii) have submitted an application for certification to the Fund demonstrating that it can be certified, not later than March 7, 2003.

Certification status:

☐ Certified ☐ Certification Application Pending

If certified, have there been any material changes since certification?

☐ No material changes have occurred in my organization since the date of its *CDFI* certification which affect its status as a certified *CDFI*.

☐ The narrative attached describes all of the material changes that have occurred in my organization since the date of *CDFI* certification, which may affect its status as a certified *CDFI*.

Tip: Material changes may include, but are not limited to, changes in ownership, governing board composition, market served, and financing activities provided. If material changes have occurred, the narrative must demonstrate whether they affect the *Applicant's* status as a certified *CDFI*.

Prior applications to the Fund:

Has the *Applicant* ever applied for assistance from the Fund under any program?

☐ yes ☐ no

Has the *Applicant* or any *Affiliate* ever received *Financial Assistance* from the Fund?

☐ yes ☐ no

Since October 1, 1999? ☐ yes ☐ no

Part VIII. Environmental Review Form

The Fund's environmental review requirements are set forth in 12 CFR part 1815. The *Applicant* should review such regulations carefully before completing this section. In order to assure compliance with those regulations and other requirements related to the environment, the *Applicant* shall provide the following information:

	Yes	No
1. Are there any actions proposed in the application that do not constitute a "categorical exclusion" as defined in 12 CFR § 1815.110?		
If YES, would any of these actions normally require an environmental impact statement (see 12 CFR § 1815.108)?		
2. Are there any activities proposed in the application that involve:		
a. Historical or archeological sites listed in the National Registry of Historic Places or that may be eligible for such listing?		
b. Wilderness areas designated or proposed under the Wilderness Act?		
c. Wild or scenic rivers proposed or listed under the Wild and Scenic Rivers Act?		
d. Critical habitats of endangered or threatened species?		
e. Natural landmarks listed on the National Registry of National Landmarks?		
f. Coastal barrier resource systems?		
g. Coastal Zone Management Areas?		
h. Sole Source Aquifer Recharge Areas designated by EPA?		
i. Wetlands?		
j. Flood plains?		
k. Prime and unique farmland?		
l. Properties listed or under construction for listing on the Environmental Protection Agency's List of Violating facilities?		
If YES to any of the above questions, attach a detailed description of each action, clearly identifying the category in which the action falls.		

As stated in 12 CFR § 1815.105, if the Fund determines that the application proposes actions which require an environmental assessment or an environmental impact statement, any approval and funding of the application shall be contingent upon:

The *Applicant* supplying to the Fund all information necessary for the Fund to perform or have performed any required environmental review;

The *Applicant* not using any Fund *Financial Assistance* to perform any of the proposed actions in the application requiring an environmental review until approval is received from the Fund; and

The outcome of the required environmental review.

In addition, as stated in 12 CFR § 1815.106, if the Fund determines that an application, or any part thereof, is not sufficiently definite to perform a meaningful environmental review prior to approval of the application, final approval and funding of the application shall require supplemental environmental review prior to the taking of any action directly using Fund *Financial Assistance* for any action that is not a categorical exclusion.

Part IX. Assurances and Certifications

A. OMB Standard Form 424b: Assurances – Non Construction Programs

Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency.

As the duly Authorized Representative of the Applicant I certify that the Applicant:

Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.

Will give the awarding agency, the Comptroller General of the United States, and it appropriate, the State, through any *Authorized Representative*, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.

Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal organizational conflict of interest, or personal gain.

Will initiate and complete the work (activities in application) within the applicable time frame after receipt of approval of the awarding agency.

Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specifies in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).

Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L.) 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of drug abuse; (g) §§ 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91- 646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a

result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

Will comply with the provisions of the Hatch Act (5 U.S.C. 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal Funds.

Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. 276c and 18 U.S.C. 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), regarding labor standards for federally assisted construction subagreements.

Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurance construction and acquisition is \$10,000, or more.

Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in flood plains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. 1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801 et seq.) which prohibits the use of lead paint in construction or rehabilitation of residence structures.

Will cause with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

B. Additional Certifications

In addition to the assurances and certifications provided by the *Applicant* pursuant to OMB Standard Form 424B, the *Applicant* hereby assures and certifies that:

It is duly organized and validly existing under the laws of jurisdiction in which it was incorporated or otherwise established, and is (or within 30 days will be) authorized to do business in any jurisdiction in which it proposes to undertake activities specified in this application.

Its Board of Directors (or similar governing body) has by proper resolution or similar action authorized the filing of this application, including all understandings and assurances contained herein, and directed and authorized the person identified as the *Authorized Representative* of the *Applicant* to act in connection with this application and to provide such additional information as may be required;

It will comply with all applicable requirements of the Community Development Banking and Financing Institutions Act of 1994 (the Act) [12 U.S.C. 4701 et seq.], regulations implementing the Act and all other applicable Department of the Treasury regulations and implementing procedures (and any regulations or procedures which are later promulgated to supplement or replace them);

It will comply, as applicable and appropriate, with the requirements of OMB Circulars (e.g., A-110 and A-133) and any regulations and circulars which are later promulgated to supplement or replace them, including standards for fund control and accountability;

It has not knowingly and willfully made or used a document or writing containing any *false*, fictitious or fraudulent statement or entry as part of this application or any related document, correspondence or communication. (The *Applicant* and its *Authorized Representative* should be aware that, under 18 U.S.C. 1001, whoever knowingly and willfully makes or uses such document or writing shall be fined or imprisoned for not more than five years, or both); and

The information in this application, and in these assurances and certifications in support of the application, is true and correct to the best of the *Applicant's* knowledge and belief and the filing of this application has been duly authorized.

C. Certification Regarding Debarment, Suspension and Other Responsibility Matters – Primary Covered Transactions

Instructions For Certification

By signing and submitting this application, the prospective primary participant (the *Applicant*) is providing the certification set out below.

The inability of a person to provide the certification required below will not necessarily result in the denial of participation in this covered transaction. The prospective *Applicant* shall submit an explanation of why it cannot provide the certification set out below. The certification or

explanation will be considered in connection with the Fund's determination whether to enter into this transaction (approval and funding of the application). However, failure of the *Applicant* to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

This certification is a material representation of fact upon which reliance is placed when the Fund determines to enter into this transaction. If it is later determined that the *Applicant* knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the Fund may terminate this transaction for cause default.

The *Applicant* shall provide immediate written notice to the Fund if at any time the *Applicant* learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

The terms "covered transactions," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause (certification), have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the Fund for assistance in obtaining a copy of those regulations (31 CFR part 19).

The *Applicant* agrees by submitting this application that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the Fund.

The *Applicant* further agrees by submitting this application that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary exclusion-Lower Tier Covered Transaction," to be provided by the Fund, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions (see 31 CFR part 19, Appendix B).

A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.

Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the Fund may terminate this transaction for cause or default.

Certification Regarding Debarment, Suspension, and other responsibility matters — Primary Covered Transactions

The prospective primary participant (the *Applicant*) certifies to the best of its knowledge and belief, that it and its principals:

Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

have not within a three-year period preceding this application been convicted of or had a civil judgment rendering against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

Have not within a three-year period preceding this application had one or more public transactions (Federal, State or local) terminated for cause for default.

Where the *Applicant* is unable to certify to any of the statements in this certification such *Applicant* shall attach an explanation to this proposal.

D. Certification Regarding Drug-Free Workplace Requirements

The *Applicant* certifies that it will provide a drug-free workplace by:

publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the *Applicant's* workplace and specifying the actions that will be taken against employee for violations of such prohibition;

establishing a drug-free awareness program inform employees about:

i) the dangers of drug abuse in the workplace;
the *Applicant's* policy of maintaining a drug-free workplace;
ii) any available drug counseling, rehabilitation, and employee assistance program;
and
the penalties that may be imposed upon employees for drug abuse violations occurring in the workplace

making it a requirement that each employee to be engaged in the performance of the award be given a copy of the statement required by subparagraph (a);

notifying the employee in the statement required by subparagraph (a) that, as a condition of employment in such grant, the employee will:

iii) abide by the terms of the statement; and
notify the employer of any criminal drug use statute conviction for a violation occurring in the workplace no later than five calendar days after such conviction;

- e. notifying the granting agency in writing, within ten calendar days after receiving notice of a conviction under subparagraph (d) (ii) from an employee or otherwise receiving actual notice of such conviction;
- f. taking one of the following actions, within 30 days of receiving notice under subparagraph (d)(ii), with respect to any employee who is so convicted:

taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or requiring such employee to participate satisfactory in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency; and

- g. making a good faith effort to continue to maintain a drug-free workplace through implementation of subparagraphs (a), (b), (c), (d), (e), and (f).

2. The *Applicant* may insert in the space provided below the site(s) for the performance of work (activities carried out by the *Applicant*) to be done in connection with the award:

Place of Performance (Street Address, City, County, State and Zip Code)

E. Certification Regarding Lobbying

1. The *Applicant* certifies, to the best of its knowledge and belief, that:
 - a. No Federal appropriated funds have been paid or will be paid, by or on behalf of the *Applicant*, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the award of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement;

If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this application, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; and

- b. The *Applicant* shall require that the Language of this certification be included in the award documents for all subawards of all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

2. This certification is a material representation of fact upon which reliance is placed when this transaction is made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S.C. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Part X. 501(c)(4) Questionnaire

A. Instructions

(to be completed by 501 (c)(4) organizations only)

This questionnaire is necessary for the Fund to determine whether an *Applicant* that has a 501 (c)(4) designation from the Internal Revenue Service is eligible to receive an award from the Fund (see 12 C.F.R. § 1805.200(a)(3)).

Please read all definitions before responding to the questions and continue to refer to such definitions in responding to this questionnaire. If the answer to any question is yes, please describe in detail the *facts* and circumstances, the subject matter(s), the date(s), the names and titles of all individuals and their employers and their organizations on a separate sheet(s) of paper. The Fund reserves the right to seek follow-up responses from an *Applicant*.

failure to complete this questionnaire and, if applicable, respond timely to follow-up questions, will delay the Fund's processing of the Application, and may result in the disqualification of the Application from further consideration. After the submission of responses to this questionnaire, the *Applicant* is under a continuing obligation to: 1) supplement its responses upon a change in circumstances; and 2) revise or modify its responses within 10 business days of having actual or constructive knowledge that the responses previously submitted and certified are no longer complete, accurate, or true. You may call the Fund's Legal Office (202-622-8662) if you have any questions about this form.

B. Scope

The scope of this questionnaire is limited to activities on or after January 1, 1996.

C. Questions

1. Has any officer, employee, director, partner, proprietor, or board member contacted¹ a "covered executive branch official"² with regard to the formulation, modification, or adoption of Federal legislation (including legislative proposals)?

Yes _____ No _____

2. Has any officer, employee, director, partner, proprietor, or board member contacted "covered executive branch official" with regard to the formulation, modification, or adoption of a

¹ "Contacted" means any oral or written communication including an electronic communication.

² "Covered executive branch official" means –

- (1) the President;
- (2) the Vice President;
- (3) any officer or employee, or any other individual functioning in the capacity of such an officer or employee, in the Executive Office of the President;
- (4) any officer or employee serving in an Executive Level I-V position, a "Schedule C" position, or any official in a Senior Executive Service position;
- (5) any officer or employee serving in a position of a confidential, policy determining, policy-making, or policy advocating character.

Federal rule, regulation, Executive Order, or any other program, policy, or position of the United States Government?

Yes _____ No _____

3. Has any officer, employee, director, partner, proprietor, or Board member contacted a “covered executive branch official” with regard to the administration or execution of a Federal program or policy (including the negotiation, award, or administration or a Federal contract, grant, loan, permit, or license)?

Yes _____ No _____

4. Has any officer, employee, director, partner, proprietor, or Board member contacted a “covered executive branch official” with regard to the nomination or confirmation of a person for a position subject to confirmation by the United States Senate?

Yes _____ No _____

5. Has any officer, employee, director, partner, proprietor, or Board member engaged in efforts supporting and coordinating the contact by others of a “covered executive branch official,” including preparation and planning activities, research and other background work that was intended, at the time performed, for a purpose described in Questions 1-4?

Yes _____ No _____

6. Has any officer, employee, director, partner, proprietor, or Board member contacted a “covered legislative branch official” with regard to the formulation, modification, or adoption of Federal legislation (including legislative proposals)?

Yes _____ No _____

7. Has any officer, employee, director, partner, proprietor, or Board member contacted a “covered legislative branch official” with regard to the formulation, modification, or adoption of a Federal rule, regulation, Executive order, or any other program, policy, or position of the United States Government?

Yes _____ No _____

8. Has any officer employee, director, partner, proprietor, or Board member contacted a “covered legislative branch official” with regard to the administration or execution of a Federal program or policy (including the negotiation, award, or administration of a Federal contract, grant, loan, permit, or license)?

Yes _____ No _____

9. Has any officer, employee, director, partner, proprietor, or Board member contacted a “covered legislative branch official” with regard to the nomination or confirmation of a person for a position subject to confirmation by the United States Senate?

Yes _____ No _____

10. Has any officer, employee, director, partner, proprietor, or Board member engaged in efforts supporting and coordinating the contact by others of a “covered legislative branch official,” including preparation and planning activities, research and other background work that was intended, at the time performed, for a purpose described in Questions 6-9?

Yes _____ No _____

Signature

By signing this application, the *Applicant* certifies that the *Applicant's* answers to the 501(c)(4) Questionnaire and the written explanations attached thereto are true, accurate, and complete to the best of its information, knowledge, and belief that, since January 1, 1996, the *Applicant* has not engaged in Lobbying Activities as defined in Section 3 (7) of the Lobbying Disclosure Act of 1995, P.L. 104-65, as amended.

Part XI. Comprehensive Business Plan

Executive Summary

(no points, for information purposes only)

Provide a narrative describing the *Applicant's* mission, key products and services and community development impact to date.

Applicant Profile: Summarize key elements of the *Applicant's Comprehensive Business Plan* (below), expected outcomes and proposed uses of *FA* and *TA*. Add a separate paragraph for each product for which you are requesting *FA*. This information may be used in the Fund's public information materials if your organization is selected for an award.

Baseline Requirements

Capital Need

Make sure you completed the Capital Need Chart ([Historical Rate of Growth](#)) or ([Other Rate of Growth](#)) to demonstrate need for additional capital.

If no, the Fund will not consider your application during this funding round. If yes, continue with the rest of the application.

If the [Capital Need Chart](#) shows that the use of the *Net Capital Available* for any product is less than the amount of the *FA* request, explain (Net Capital Available is Total Capital Available for Financing that is dedicated to the products for which the applicant requests *FA*). If the Proposed Uses of Funds shows that more than 10 percent of the requested amount will be used for *Development Services*, *Loan Loss Reserves* or Other uses, explain.

Matching Funds

Make sure you complete the [Matching Funds Summary Chart](#). Does the chart show that matching funds in hand equals at least 25% of requested financial assistance AND matching funds committed equals at least 50% of requested financial assistance?

If no, the Fund will not consider your application for *FA*. You may reduce the amount of your *FA* request in order to meet the *Matching Funds* requirement. If yes, continue.

Market Need and Community Development Performance

(maximum points: 40; 20 points minimum needed)

Market Need (up to 10 points)

Upload to MyCDFI (or attach printed copies of) any *Investment Areas* and *Hot Zones* that you plan on serving with the products in this application for which you are requesting funding. Attach the map and worksheet for each from the On-Line Help desk at www.CDFIfundhelp.gov. [Help Desk](#).

Note: You do not need to be certified on the basis of serving an *Investment Area* in order to designate a *Hot Zone(s)* in this funding application.

Provide a brief narrative describing your market's (and *Hot Zone*'s) economic distress and need and demand for the *Financial Products* and other activities for which you are requesting *FA*. In separate paragraphs, articulate the need for a.) *Economic Development* products, b.) *Affordable Housing* products, and c.) *Financial Services Products*. Be sure to articulate the similarities and differences in economic distress and need for your products if you serve more than one *Target Market* indicate whether there are other entities in the market providing similar financial products and services, and if so, indicate how your activities are different. If you serve an *Other Targeted Population(s)*, describe the population's lack of access to loans, *Equity Investments* and *Financial Services*.

Applicant Activities (up to 20 points)

TIP: This section evaluates the *Applicant's* realistic projections for community development impact. You should be sure that the projections in your Activities Level Chart and Impact Performance Chart are realistic. If your organization is selected to receive funding, your performance expectations will be based on your projections.

Make sure you completed the [Activities Level Chart](#) with realistic projections. Make sure to complete the *Hot Zone* column each if you are designating a *Hot Zone(s)*.

Review the [Impact Performance Chart](#), making sure that you project impacts for each of the activities for which you are requesting *FA*.

For your a) *Economic Development Products*, b) *Affordable Housing Products*, and c) *Financial Services* products, explain how you arrived at the projections on the Activities Level and Impact Performance Charts. For example, are projections based on trends of past volume, a market study or survey, or assessments by partner organizations? If you are proposing to serve multiple markets, explain your projections for each product in each market.

Do you expect that 50 percent or more of your activities will be directed to or benefit *Very Low-Income* individuals or households?

If yes, explain for your a) *Economic Development Products*, b) *Affordable Housing Products*, and c) *Financial Services* products.

TIP: In order to maximize resources to the most underserved communities, the Fund will look to support those *CDFIs* that demonstrate that a high level of their activities (greater than 60 percent) will be directed to highly distressed communities (*Hot Zones*) and/or promote homeownership for *Low-Income* and *Other Targeted Populations*. *Applicants* will receive maximum points in this section only if they demonstrate significant levels of activity in *Hot Zones*.

Do the *Applicant's* projected activities and corresponding community development impacts serve greater than 60 percent in the *Target Market* or greater than 50 percent to a designated *Hot Zone(s)*?

If no, explain.

TIP: A successful *Applicant* will score well in this section if it can show that there will be significant additional community development impact created through *FA* that would not be created without the *FA* and that a *FA* award is an optimal use of the Fund's dollars.

Effective Use and Leverage of Fund Dollars

Is the *FA* needed in order for the *Applicant* to create community development impact in the *Target Market* and/or *Hot Zone* or to create impact in promoting *Low-Income* and *Other Targeted Population* homeownership?

Explain for your a) Economic Development Products, b) Affordable Housing Products, and c) Financial Services products.

Complete the Leverage Chart and indicate what other resources will be leveraged, directly or indirectly through the *FA*. If you provide multiple product lines, separately describe for your a) *Economic Development Products*, b) *Affordable Housing Products*, and c) *Financial Services* products.

Optional: Describe how the activities projected on the Impact Performance Chart will have a positive impact on the needs described in the Market Need section, particularly the hardest to serve elements of that market (such as *Very Low-Income* people, recent immigrants, remote rural communities). If you provide multiple product lines, or serve multiple markets, describe for each your a) *Economic Development Products*, b) *Affordable Housing Products*, and c) *Financial Services* products.

Prior Awardees (CDFI Program and NACTA Program):

If the *Applicant* or its *Affiliates* have previously received assistance from the Fund, how has it used such funding?

TIP: *Applicants* selected previously by the Fund to receive assistance under the *CDFI* Program or the *NACTA* Program are expected to show new products offered, a higher volume of activity, products provided in a more distressed or harder to serve market, and/or products that provide a higher level of leveraging of the Fund's dollars with private sector and local resources.

What additional benefits would accrue your *Target Market* with additional *FA*? Describe for your a) *Economic Development Products*, b) *Affordable Housing Products*, and c) *Financial Services* products.

Note: The Fund will consider in this subsection the extent to which the *Applicant* has complied with performance goals and other requirements in previous *Assistance Agreements*. *Applicants* that are delinquent on any report due the Fund at the time of application will not be considered for funding.

Product Design and Strategy (up to 10 points)

TIP: An *Applicant's* plan will be evaluated more highly to the extent it shows a realistic plan in place to deliver its products and services, including, where appropriate, coordination with

other local, private sector, and federal resources. The Fund will look to support *Applicants* that show the ability to deliver innovative products and services that meet the needs of underserved communities, particularly the *Programmatic Priorities* described in the NOFA. A *Category II Applicant* will not receive more than five points in this subsection unless it demonstrates that the *FA* award will be used to leverage other financial resources through such approaches as funding loan loss reserves, credit enhancements for lines of credit, or enhancements to facilitate secondary market sale of working assets or provide innovative products to serve particularly underserved communities.

Overall:

Does your Activities Level Chart demonstrate that you are proposing to use *FA* to deliver new product(s)?

If yes, describe your strategy for beginning the new product(s), including market research, product testing and marketing for each new product. Address your a) *Economic Development Products*, b) *Affordable Housing Products*, and c) *Financial Services* products.

Does your Activities Level Chart demonstrate that you are proposing to serve a new *Target Market* other than that which you have been serving?

If yes, describe your strategy for entering the new *Target Market*, including market research, partnerships, outreach and other factors. Address your a) *Economic Development Products*, b) *Affordable Housing Products*, and c) *Financial Services* products.

Describe your coordination efforts; specifically, how the *Applicant* will leverage resources by coordinating with other providers in the service area; coordination of delivery with other Federal community development public-private partnership initiatives, *Affiliates*, community organizations, financial institutions, tribal governments and other public and private entities. Provide a description for your a) *Economic Development Products*, b) *Affordable Housing Products*, and c) *Financial Services* products.

Category II Applicants: Describe the extent to which the *FA* will be used to leverage private sector resources to provide increasing financing to the *Target Market*, such as through a loan loss reserve, credit enhancement for lines of credit, or enhancements to facilitate secondary market sale of working assets.

Describe the extent to which the *Applicant's* activities are consistent with existing economic, community and housing development plans adopted by or applicable to your *Target Market*, including Federally-sponsored or recognized economic development and housing initiatives, including minority homeownership partnerships, Empowerment Zones, Enterprise Communities, or similar initiatives. Discuss for your a) *Economic Development Products*, b) *Affordable Housing Products*, and c) *Financial Services* products.

Note: You may be asked during the application review process to provide documentation of your role in these initiatives.

Optional: Discuss how your products and services address the needs and demands of the *Target Market* (e.g. flexible underwriting criteria, nontraditional forms of collateral, low down-payment requirements) or serve as an innovative model for attracting financial resources to underserved markets, other than described in the Financial Product Description Chart.

Optional Category II Applicants: Further Question 21, address how your products innovatively meet the needs of highly underserved markets.

Note: no more than 5 points will be awarded under this item to a *Category II Applicant* unless it demonstrates that a *Financial Assistance* award will be used to leverage other financial resources through such approaches as funding *Loan Loss Reserves*, credit enhancements for lines of credit, or enhancements to facilitate secondary market sale of working assets.

Is the Applicant Community-Owned?

Is the Applicant Community-Governed?

Are you submitting an application with a *Community Partner*?

If yes, describe the role of the *Community Partner* in delivering products and services in your *Target Market*; how you will ensure quality performance by the *Community Partner*; how the *Community Partner* will enhance the likelihood of success of the *Comprehensive Business Plan* and how service to the *Target Market* will be better performed by a partnership than by the *Applicant* alone.

[Attach](#) a copy of the *Community Partnership*.

Review the [Financial Product Description Chart](#) making sure it reflects all of the *Financial Products* that you provide.

Development Services

Complete the *Development Services* Chart describing all *Development Services* that you provide.

Financial Services and Consumer Lending

Complete the [Financial Services Description](#) section further in the *Comprehensive Business Plan*. *Optional:* Describe any characteristics not described on the *Financial Services* Description Chart.

Management and Underwriting

(maximum 20 points in this section, minimum of 10 needed)

Underwriting and Risk Mitigation (up to 10 points)

Note to Prior Awardees: The Fund will consider in this subsection whether the Applicant has had late reports due to the Fund or other instances of failing to comply with Fund requirements.

Portfolio Quality

29. Complete or attach as applicable:

Insured Credit Unions: [Attach](#) NCUA Financial Performance Ratios.

Insured Depository Institutions: [Attach](#) Uniform Bank Performance Report.

Non-Regulated CDFIs: Complete the Loan Portfolio Quality [Chart\(s\)](#) and/or [Equity Investment Valuation Chart](#) as appropriate.

30. **Lenders:** If the *Portfolio-at-Risk* is greater than 6 percent (for loan funds), or greater than the peer average (for regulated *CDFIs*), explain.
31. **Investors:** Explain any losses and devaluations in the investment portfolio. Indicate how investments have fared compared to projections (including valuations, returns and exits).
32. **Investors:** Explain sources of “Other Returns” in the *Investment Valuation Chart*.

Risk Mitigation Strategies

Complete this section only if you have NOT previously been selected to receive *Financial Assistance* from the Fund or were not selected to receive *FA* and *TA* assistance before October 1, 1999. *Applicants* that have received *FA* from the Fund since that time will be evaluated in this section on the basis of the *Applicant's* policies and procedures previously submitted to the Fund.

Note: The online application cannot currently verify whether you are required to complete this subsection. If you ARE required to complete this subsection and do not, your application will be found to be incomplete.

33. Attach a copy of the *Applicant's* policies and procedures for each of the following: portfolio monitoring, underwriting, risk rating, and financial management, including internal controls/cash management. Indicate on each, the date they were last reviewed and/or updated by the *Applicant's* governing board. Complete the following, as applicable:

	<i>Economic Development Product Portfolio (includes Equity Investments)</i>	<i>Affordable Housing Product Portfolio</i>	<i>Consumer loan product portfolio</i>
Frequency of portfolio review (quarterly, monthly, weekly)			
Are risk rating and reserves policies revised at time of review? (Yes/No)			
What are the lending limit policies? (describe)			
Do you require borrower/investee reporting (annual, quarterly, other)?			
Are monitoring and portfolio management information systems in place (if yes, name of software)?			

Are all policies and procedures board approved? (Yes/No)			
Are any exceptions to eligibility criteria allowed (describe or none)?			
Are liquidity and operating reserve adjustment policies in place? Yes/No			
Are board and staff conflict of interest policies in place? Yes/No			

34. If any of the above policies or management information systems are not in place, explain why not and your plan to implement them.
35. Does the *Applicant* have policies and procedures related to portfolio diversification?
- a. If yes, describe. If no, why not?
36. Discuss the steps in loan/investment application, review, and approval process. If different for each of your products, describe.
37. What are the roles of the board and/or loan/investment committee, management team and staff responsible for implementing the lending/underwriting policies and procedures?
38. **Lending organizations:** What steps are taken to ensure accurate and timely record keeping and servicing of the loan?
39. Has the *Applicant* assessed risk in the following areas: human resources and succession; technology and communication systems, and physical losses? If applicable, has it instituted policies and procedures to mitigate these risks?

Management Capacity

(up to 10 points)

Tip: A successful *Applicant* will demonstrate that it has staff that has experience delivering the products to its *Target Market* and a governing board that enhances the organization through providing a wide range of skills and connections to resources.

40. Attach an organizational chart, showing all positions including governing board, staff, and, if applicable, volunteers and consultants that are in integral part of the *Applicant's* operations. Each staff position should include the staff name, title, and month and year of hire.

41. Attach a list of the members of the governing board and any working committees, including affiliations and position on the board.
42. [Attach](#) resumes for all key staff and members of the board's executive committee, loan/investment committee, and audit committee.
Number of resumes attached: _____
43. Review the [Management Chart](#).
44. For any vacancies or new positions, describe the status of filling the position and the strategy for doing so, as well as the expected date of filling the position.
45. Does the organization have a succession plan in place for its executive director or other key management position?
- a. If yes, describe and indicate when they were last reviewed or updated (month and year).
46. Describe the roles and responsibilities of the board, any working committees (e.g., loan committee, executive committee, audit committee, investments committee), and key staff. Describe the relevant experience in community development, community development finance, or loan/investments underwriting for key staff, board members and any other individuals critical to carrying out the *Comprehensive Business Plan* and serving the *Hot Zone(s)* (if applicable). If such narrative is not provided, the Fund will use resumes to assess the experience in this area. Discuss any new staff expected, staff training, or other organizational development that the organization has undertaken or will need to undertake in order to effectively implement the *Comprehensive Business Plan*.

Tip: This narrative is used to highlight experience in community development and community development finance not clear from attached resumes.

Financial Health

(maximum of 20 points, minimum of 10 points needed)

Tip: Successful *Applicants* will demonstrate their past and likelihood of future financial health. If awarded *FA*, performance goals will be developed with all non-regulated organizations to ensure financial soundness.

Financial Track Record

47. Review the Financial Data Input Chart ([Historical Rate of Growth](#) or [Other Rate of Growth](#)) and [attach](#) *Financial Statements* as applicable for the *Applicant* for the last three years (or as many years as available if the *Applicant* has been in operation for less than three years). If audited financial statements are consolidated, be sure to attach applicant's unconsolidated financial statements.

Non-Regulated Applicants: Financial Statements may be audited or reviewed by an independent Certified Public Accountant (C.P.A.), if audited statements are not available. If audited or C.P.A. reviewed statements are not available, submit internal

Financial Statements and explain why audited statements are not available.

Insured Credit Unions & Insured Depository Institutions Submit **Financial Statements** for the last 3 completed years that have been reviewed by the **Applicant's Appropriate Federal Banking Agency** (e.g. National Credit Union Administration Form 5300, or Uniform Bank Performance Report).

Applicants with Affiliate(s) If the audited **Financial Statements** of the **Applicant** are consolidated with its **Affiliate(s)** and do not include separate schedules on the **Applicant's** financial position and income and expense statements, also submit a separate set of internal **Financial Statements**, which clearly distinguish the **Applicant's** financial information from that of the **Affiliates**.

48. **Insured Credit Unions and Insured Depository Institutions** Submit Financial Performance Ratios prepared by NCUA and Uniform Bank Performance Report, respectively, for the last three completed fiscal years. These reports must cover the same three years as the *Financial Statements*.
49. *Optional*: Explain historical and projected financial performance, including: low capital (net assets, net capital); low deployment (loans receivable as a percentage of lending capital); negative or decreasing earnings; high or increasing staff expenses, and low operating liquidity (less than one quarter of annual of expenses).

TIP: The narrative is optional, but recommended. The narrative is used to explain any factors in your financial history or projections that may be negatively viewed by the reviewer. A successful *Applicant* will describe steps it has taken or will take to remedy downward financial trends. For example, discuss goals for increasing *Self-Sufficiency Ratio*, increasing *Net Asset Ratio* and/or generating positive net income.

Deployment

50. If your overall level of deployment reported on the Financial Ratios Chart is historically or projected at 70 percent or less, explain why *FA* is needed for particular products (address, for example, any restrictions on uses of financing capital).

Financial Sustainability and Matching Funds

(maximum of 20 points, minimum 10 points needed)

Financial Sustainability (maximum 10 points)

51. Review the Key Financial Data and Ratios Chart (Historical Rate of Growth or Other Rate of Growth) for the projected three years encompassed in the *Comprehensive Business Plan*, assuming *FA* in the amount requested, and such funds are available December 31, 2003.
52. Provide key assumptions underlying the projections for the next five years, including:

expected infusions of debt or equity capital; increases in loan production; cost of capital; level of earned income from fees and interest. Describe the *Applicant's* strategy for: sustaining projected operations through earned income, grants, contributions and or other resources; capitalizing loan or investment fund through debt, equity, secondary markets or other resources; and diversifying operational and loan capital. If you selected Other Rate of Growth for the Key Financial Data Input Chart, explain how you determined the projected rate of growth.

Matching Funds (maximum 10 points)

53. Complete the [Matching Funds Summary Chart](#).

54. Provide a narrative describing the strategy for raising the remaining *Matching Funds* by April 30, 2004. Discuss the status of the funding request(s) as of the date of this application and include the name of the contact person for each potential funding source.

Note: The Fund may ask for updated information on the status of *Matching Funds* during the application review process.

Tip: The Fund puts the greatest weight on *Matching Funds In-Hand*.

55. *Insured Credit Unions* If planning to use *Retained Earnings* as *Matching Funds*, provide a narrative describing your strategy for raising loan volume or shares by June 30, 2005.

Documentation

Tip: The *Applicant* must provide sufficient documentation in this application for the Fund to determine that the *Matching Funds* are eligible and consistent with the *FA* request.

[Attach](#) the following documents (hard copy attachments)

56. *Matching Funds In-Hand*: For each source of *Matching Funds*, provide copies of executed documentation evidencing that the funds were disbursed. Acceptable documentation includes: a promissory note, loan agreement, grant letter, partnership agreement or similar document as proof of execution; **and** a check or wire transfer verification or similar evidence of disbursement.

57. *Matching Funds Firmly Committed*: For each source of *Matching Funds*, provide written documentation evidencing that the funding source is committed to disbursing the funds. For example, acceptable commitment documentation includes: a grant letter, loan letter or similar document. *Matching Funds Firmly Committed* documents must be in writing, on the funder's letterhead; signed by the funder, and dated; indicate that the *Matching Funds* is for the *Applicant*; correspond in form to the investment requested (i.e., grant for grant, loan for loan); and provide a date by which the *Matching Funds* will be disbursed to the *Applicant*.

Financial Services Description

Check all that apply.

At least one item must be checked.

You indicated in Question 28 that you plan to offer Consumer Loans and Financial Service products. Please check below any that apply to the Consumer Loan and *Financial Services* products that your organization provides.

Deposit and Financial Services

- ☐ First Accounts
- ☐ Individual Development Accounts
- ☐ *Applicant* provides the matching funds
- ☐ *Applicant* provides depository services only
- ☐ no minimum balance accounts
- ☐ ATMs
- ☐ check cashing to non-members/account holders
- ☐ debit cards
- ☐ low-cost money orders (less than \$2)
- ☐ bill payments
- ☐ overseas remittances

Other: _____

Other: _____

Other: _____

Consumer Loan Products

- ☐ credit-builder loans
- ☐ payday alternative loans
- ☐ credit cards

Other: _____

Other: _____

Other: _____